

2000/000

ASS. REC. BY:

REF:

CS/FCL1902035/T1E9302

Special Instructions:

Surveyor: Tan Kah

ASSIGNMENT (Office)

From (Person): Karen

of

FCL

Date/Time: 12.11.19 12.43 p.m.

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SHC 75207

Insured: SHB 6336 L

at Workshop n/a: Ding Automotive

Tel: 95299924

of 31 Corporation Rd

Policy No:

Claim No: D19007153MPSH

Sum Insured:

Excess:

Make of Veh:

D.O.A. 10.11.2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 12.11.19 1.11 p.m.

Person Contacted:

Guang

Vehicle: IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SHB 6336 L / 03/02/2019/255755/4/2/3/2 SHB 14/12/2019

SHC 75207 / CS/FCL1902035/Karen2 SHC 24/12/2019

13/11/19 @ 11.39am revised to Karen Tan by email

Part by Part \$2344.90; 3days (Red: 655; 210%)

Tamphm
ASS. REC. BY:

REF:

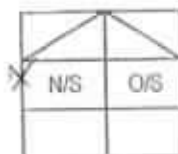
FCI

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To inspect Vehicle No: _____
at Workshop m/s _____
of _____
Insured: _____
Policy No: _____
Claims No: _____
Sum Insured: _____ Excess: _____
(Client's Record)
Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value: _____
IDAC Accident Report: _____ Consistent? : Yes or No
GIA / PR Seen: _____ Consistent? : Yes or No
Est. Repairs: _____ days Res.: Yes or No
Lum Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHL75205 Yr Regn: 2017 Sep
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Toyota Prius Hybrid Cc: 1798
Colour: Yellow A/C: Insured / Std / NI / NA
Sp. Reading: 287848 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: STDWB3F4703565673
Gen. Cond: Good / Fair / Poor / Burnt
Steering: Inorder / Jammed / Leaked / Burnt or
Brake: Inorder / Jammed / Leaked / Burnt or
Modi: NI / S/Rim / STD A/Rim or
Tyre Size: F: 195/65R15
R: ~
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Triangle
Front: _____ Rear: _____
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. _____ D.O.L. 12/11/19
Survey held at Dingant
Des. of Damages: Frt / Rear / O/S / NI / U/C / Rooftop or
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

RECEIVED 22 NOV 2019

Date/Time, File Pairs in?

22/11 Typist

Date/Time, File Return in?

2

Rep. Form:

Estim. Sum / U/C /

☐ : Preli. Report
☒ : Final Report

TP

2344.90

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : Wind end (\$)

Survey Fee:

Transportation

S + RS - SI

Photo

Other

TOTAL

110

50

30+50+50

38

348



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your Ref: D19007153MFSH

Date: 13 November 2019

Our Ref: CS/FCI19020035/T1tf3

The Motor Claims Department
MS First Capital Insurance Ltd

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SHC 7520J

Please be informed that we had conducted the inspection of the abovementioned vehicle on 12/11/2019 at the premises of M/s DING AUTOMOTIVE, and have the following to report:-

Workshop Estimate Amount	: S\$ 2,999.90
Revised Estimate Amount	: S\$ 2,195.90
"Check" Items Amount	: S\$ 149.00
Market Value	: S\$ -
LTA Reimbursement Value	: S\$ -
Nett Value	: S\$ -

Description of Damage:
The vehicle sustained damages
at the n/s portion.



Yours faithfully

Taufikh
Automotive Assessor

MOTOR SURVEY ASSIGNMENT

Date	11-11-2019	Our Ref No. D19007153MFSH
Accident Date	10-11-2019	Claim Type. Third Party
Insured Vehicle	SHB6336L	Third Party Vehicle. SHC7520J
Survey Location	31 CORPORATION ROAD	
Contact Person.	GUANG	
Contact No.	62657130/ 93299929	Fax No. 0
Survey Type	WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	DING AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	KARENT	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.

Shiau Chan (LKKAuto)

From: Shiau Chan (LKKAuto)
Sent: Wednesday, 13 November 2019 11:39 AM
To: 'CWS Motor Claims'; assignments; SUR
Cc: 'Karen Tan'
Subject: RE: SURVEY ASSESSMENT - D19007153MFSH/1
Attachments: CSFCI19020035T1tf3.pdf

Dear Karen,

Enclosed herewith preliminary advice of SHC 7520J.

Best Regards,

Shiau Chan (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: siewsc@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Tuesday, 12 November 2019 1:13 PM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>; SUR <sur@lkkauto.com>
Cc: 'Karen Tan' <karentan@msfirstcapital.com.sg>
Subject: RE: SURVEY ASSESSMENT - D19007153MFSH/1

Dear Sir/Madam,

Thank you for your assignment.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Sent: Tuesday, 12 November, 2019 12:43 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Karen Tan <karentan@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19007153MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

TO

FAX NO:

ESTIMATE REPORT 1ST Quotation

11/11/2019 10:11

JOB NO: 50112183

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE
SINGAPORE 575717 U

64736522

VEHICLE DETAILS

LICENSE NO: SHC7530J

TRANS: AUTO

CHASSIS: JTDKB3FU700563673

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

ENGINE: 2ZR5062325

OWNER'S INSURER: MS First Capital Insurance Limited

JOB CODE: TP

SA: Ding Auto User 2

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SURDISP	REV PRICE
LABOUR							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	500.00	0.00	500.00		Y	350
2 SUNDRIES	1.00	50.00	0.00	50.00		Y	20
3 RUST PROOFING	1.00	80.00	0.00	80.00		Y	30
4 R&R FRONT DOOR COMPONENTS LH	1.00	150.00	0.00	150.00		Y	60
5 DIAGNOSTIC (CLEAR FAULT CODE) & RESETING POWER WINDOW AUTO	1.00	200.00	0.00	200.00		Y	120
6 RESPRAY FRONT DOOR LH	1.00	250.00	0.00	250.00		Y	200
7 RESPRAY FRONT DOOR OUTER HANDLE LH	1.00	100.00	0.00	100.00		Y	50
TOTAL:		1,330.00	0.00	1,330.00			

MATERIALS

1 FRONT DOOR LH	1.00	1,635.99	409.00	1,226.99	L	Y	61
2 FRONT DOOR OUTER HANDLE LH	1.00	151.77	37.84	113.83	L	Y	60
3 FRONT DOOR OUTER HANDLE INNER BRACKET LH	1.00	198.87	49.87	149.00	L	Y	80
4 FRONT DOOR OUTER HANDLE PAD LH	1.00	33.44	8.36	25.08	L	Y	20
5 FRONT DOOR STICKER-COMFORT DELGRO LH	1.00	120.00	0.00	120.00	S	Y	20
6 FRONT DOOR TRIM BOARD CLIP SET LH	1.00	35.00	0.00	35.00	S	Y	20
TOTAL:		2,174.87	504.87	1,669.90			

TOTAL PARTS & LABOUR:

3,504.87 504.87 2,999.90

EXCESSLOADING: 0.00

No. Of Day:

RE-SURVEY: BEFORE/AFTER PAINTING

PART BY PART OR LUMP SUM: \$

DATE OF SURVEY:

12 / 11 / 19

SURVEYED BY:

CONTACT NO:

97645749

FAX NO:

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

Part By Part

Labour = \$730

S.A. = \$160

Parts = \$1514.90

LTS + P = \$2344.90

Total Amount = \$2344.90

TO :

FAX NO:

ESTIMATE REPORT 1ST Quotation

11/11/2019 10:11

JOB-NO: 50112183

OWNER'S PARTICULARS

NAME: CityCab PTE LTD (Fleet)

CONTACT: 65533880

Page 1 of 2

ADDRESS: 383 SIN MING DRIVE

64739522

SINGAPORE 575717 0

VEHICLE DETAILS

LICENSE NO: SHC7520J

TRANS: AUTO

CHASSIS: JTDKB3FU703563673

MAKE / MODEL: TOYOTA / Prius Hybrid 1.8 CVT

ENGINE: 2ZRS062325

OWNER'S INSURER: MS First Capital Insurance Limited

JOB-CODE: TP

SA: Ding Auto User 2

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
LABOUR							
1 STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS	1.00	500.00	0.00	500.00		Y	250
2 SUNDRIES <i>ncc</i>	1.00	50.00	0.00	50.00		Y	20
3 RUST PROOFING	1.00	80.00	0.00	80.00		Y	30
4 R&R FRONT DOOR COMPONENTS LH	1.00	150.00	0.00	150.00		Y	60
5 DIAGNOSTIC (CLEAR FAULT CODE) & RESETING POWER WINDOW AUTO	1.00	200.00	0.00	200.00		Y	120
6 RESPRAY FRONT DOOR LH	1.00	250.00	0.00	250.00		Y	200
7 RESPRAY FRONT DOOR OUTER HANDLE LH	1.00	100.00	0.00	100.00		Y	50
TOTAL:		1,330.00	0.00	1,330.00			

MATERIALS

1 FRONT DOOR LH	1.00	1,635.99	409.00	1,226.99	L	Y	61
2 FRONT DOOR OUTER HANDLE LH	1.00	151.77	37.94	113.83	L	Y	60
3 FRONT DOOR OUTER HANDLE INNER BRACKET LH	1.00	198.67	49.67	149.00	L	Y	100
4 FRONT DOOR OUTER HANDLE PAD LH	1.00	33.44	8.36	25.08	L	Y	20
5 FRONT DOOR STICKER-COMFORT DELGRO LH	1.00	120.00	0.00	120.00	S	Y	80
6 FRONT DOOR TRIM BOARD CLIP SET LH	1.00	35.00	0.00	35.00	S	Y	20
TOTAL:		2,174.87	504.97	1,669.90			

TOTAL PARTS & LABOUR : 3,504.87 504.97 2,999.90

EXCESS/LOADING: S\$ 0.00

No. Of Day: 3

RE-SURVEY: BEFORE/AFTER PAINTING
PART-BY-PART OR LUMP SUM: S\$

DATE OF SURVEY: 12 / 11 / 19

SURVEYED BY: *Tanji*

CONTACT NO: 97445749

FAX NO:

NOTE: LUMP SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED

DAuto002

Ding Auto User 2

KK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- To be subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from insurance

G-STAR-WI-ET-001-02-Rev00

Acknowledged by Repairer

Signature:

Date:

\$2344.90
3 days

CLAIM DETAILS

DESCRIPTION	QTY	QUOTED COSTS	DISCOUNT	DISC PRICE	IND	SUR.DISP	REV PRICE
-------------	-----	--------------	----------	------------	-----	----------	-----------

ESTIMATOR

STA AUTOCENTRE

TEL:

FAX:



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile				
MS FIRST CAPITAL INSURANCE LTD		Ref : CS/FCI19020035/T11f3n2		
36 ROBINSON ROAD #16-01 CITY HOUSESINGAPORE 068877		Date : 22-11-2019		
		Code : FCI2		
1. Policy Particulars :- THIRD PARTY CLAIM				
	Insured Veh.	SHB 6336L	Veh. Inspected	SHC 7520J
	Policy No.		Coverage (\$)	0.00
	Claim No.	D19007153MFSH	Excess (\$)	0.00
	Assign From	KARENT	Assign Date	12/11/2019
2. Vehicle Particulars & Condition				
	Make & Model	TOYOTA PRIUS HYBRID	c.c	1798
	Engine No.	HIDDEN	Year of Reg.	2017
	Chassis No.	JTDKB3FU703563673	Colour	YELLOW
	Odometer	287848	Steering	IN ORDER
	Brakes	IN ORDER	Modification	NIL
	General	GOOD		
3. Conditions of Tyres				
		Size	Make	Balance
	R/H Front Tyre	195/65 R15	TRIANGLE	6 mm
	L/H Front Tyre	195/65 R15	TRIANGLE	6 mm
	R/H Rear Tyre	195/65 R15	TRIANGLE	6 mm
	L/H Rear Tyre	195/65 R15	TRIANGLE	6 mm
4. Description of Damages				
	THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.			
	DAMAGES SEE DETAILS.			
5. General Information				
	Accident Date	10/11/2019	Inspection Date	12/11/2019
	Survey held at	31 CORPORATION ROAD		
	Repairer	DING AUTO PTE LTD		
5a. Remarks				
	A) DAMAGES CONSISTENT TO ACCIDENT REPORT. B) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. C) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.			
5b. Estimate Days of Repair				
	ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days	

**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 7520J

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT DOOR LH	BENT	1,635.99	1,635.99
1	FRONT DOOR OUTER HANDLE LH	BROKEN	151.77	151.77
1	FRONT DOOR OUTER HANDLE INNER BRACKET LH	CRACKED	198.67	198.67
1	FRONT DOOR OUTER HANDLE PAD LH	MISSING	33.44	33.44
	LESS 25% DISCOUNT		-504.97	-504.97
			1,514.90	1,514.90
<u>SPECIAL NETT ITEMS</u>				
1	FRONT DOOR STICKER-COMFORT DELGRO LH (SN)	NECESSARY	120.00	80.00
1	FRONT DOOR TRIM BOARD CLIP SET LH (SN)	NECESSARY	35.00	20.00
1	SUNDRIES (SN)	NECESSARY	50.00	20.00
			205.00	120.00
<u>LABOUR</u>				
	STRAIGHTEN AND PANEL BEAT ACCIDENT AREAS.		500.00	250.00
	RUST PROOFING.		80.00	30.00
	R&R FRONT DOOR COMPONENTS LH.		150.00	60.00
	DIAGNOSTIC (CLEAR FAULT CODE) & RESETTING POWER WINDOW AUTO.		200.00	120.00
	RESPRAY FRONT DOOR LH.		250.00	200.00
	RESPRAY FRONT DOOR OUTER HANDLE LH.		100.00	50.00
			1,280.00	710.00
GRAND TOTAL			2,999.90	2,344.90
RECOMMENDED COST OF REPAIRS				2,344.90

Report Ref No. CS/FCI19020035/T1tf3n2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

ADRIAN LING WAI PING

B.Eng,AMSOE,AMIRTE,AMSAE-A,M.MATAI

Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.